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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4616)		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/671,702
		Filing Date	September 29, 2003
		First Named Inventor	TORU SAITO ET AL.
		Examiner Name	Sophia S. Chen
		Art Unit	2852
<input type="checkbox"/> Applicant claims small entity status. See 37 C.F.R. 1.27		Attorney Docket No.	03500.017609
TOTAL AMOUNT OF PAYMENT		(\$) 200.00	

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
20	- 20 or HP = 0	x 0 = 0				
HP = highest number of total claims paid for, if greater than 20						
					0	0

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	- 3 or HP = 1	x 200.00 = 200.00	
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

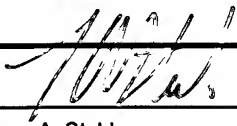
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) 30,110	Telephone 202-530-1010
Name (Print/Type)	Lawrence A. Stahl	Date: February 17, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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FEB 17 2003
UNIT 2, TRADEMARK OFFICE
In re

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TORU SAITO ET AL.

Application No.: 10/671,702

Filed: September 29, 2003

For: **FIXING APPARATUS AND IMAGE FORMING APPARATUS**

Examiner: Sophia S. Chen

Group Art Unit: 2852

Confirmation No.: 7432

February 17, 2005

Mail Stop Amendment

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, Virginia 22313-1450

AMENDMENT, SUBMISSION OF SWORN TRANSLATION AND SUBMISSION OF REPLACEMENT DRAWINGS

Sir:

In response to the Office Action mailed November 18, 2004, the Examiner is respectfully requested to consider and enter the following amendments:

02/22/2005 MBEYENE1 00000050 10671702

01 FC:1201

200-43 037